

AMOUNT, DURATION AND SCOPE OF  
SERVICES PROVIDED

Revised: April 1, 2002

CATEGORICALLY NEEDY

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7.a. Home Health Services

7.b. Based on a physician's prescription as to medical necessity provided to eligible recipients at their place of residence not to include institutions required to provide these services. For services above **50** visits per recipient per State Fiscal Year, the provider must request an extension. Extension of the benefit limit will be provided for all recipients, including EPSDT, if determined medically necessary.

7.c. Medical supplies, equipment, and appliances suitable for use in the home.

(1) Home health supplies are limited to a maximum reimbursement of \$250.00 per month, per recipient. As medical supplies are also provided to recipients in the Prosthetics Program, the maximum reimbursement of \$250.00 per month may be provided through the Home Health Program, the Prosthetics Program or a combination of the two. However, a recipient may not receive more than \$250.00 per month in supplies whether received through either of the two programs or a combination of the two unless an extension has been granted. Extensions will be considered for recipients under age 21 in the Child Health Services (EPSDT) Program if documentation verifies medical necessity. The provider must request an extension of the established benefit limit.

(2) Home health equipment is limited to specific items. Specific home health equipment is listed in Section III of the Prosthetics Provider Manual.